Nevada State Board of LURSING EWSLETER

April 1999

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Research Supports Advisory Opinion

RNs practice safely when performing a procedure done previously only by physicians

A recent research project validated a Nevada State Board of Nursing advisory opinion allowing registered nurses to insert intrauterine pressure catheters to assist with evaluation and management of labor.

A little over a year ago, the Board approved the recommendation of its Nursing Practice Committee to allow RNs to insert intrauterine pressure catheters (IUPCs). It also agreed to call for research into the outcomes of the new policy.

Jack Lau, a master's candidate at UNLV, answered the call by conducting a research project at the University Medical Center in Las Vegas. He presented his results to the Board at its March meeting.

"After studying the medical records of 26 patients," Lau said, "I found that UMC registered nurses performed the insertion safely, with no negative outcomes." (After the Board issued its December 1997 advisory opinion, UMC changed its policy to allow registered nurses to insert intrauterine pressure catheters. The hospital's previous policy allowed only UMC physicians to perform the procedure.)

Lau also reported that UMC administrators, physicians, nurses and patients supported the new practice, noting that when clinical situations call for IUPC placement, physicians are not always immediately present. He added that even when present, the doctor may prefer the nurse insert the IUPC, so the doctor is free to perform other necessary functions.

Lau concluded by complimenting the Board for requesting research on a topic which had never been studied before and said he hopes future research involving IUPC placements will include nurses.

Board Executive Director Kathy Apple commented, "I think this shows once again that nurses in our state are asking great questions about practice and the Board's answers are often setting precedent."

Not Enough Nevada Nurses?

UCCSN report says supply unlikely to keep up with demand

Nevada is losing ground in its efforts to train nurses and other health care workers to help meet the growing demand for medical services. That is the conclusion of the *Report on Health Care Education in Nevada*, prepared by the University and Community College System of Nevada for the state legislature.

Through 2006, Nevada will have annual openings for 760 registered nurses and 200 licensed practical nurses, according to the report's author, Dr. John Packham, who gave an overview of his findings to the Nevada State Board of Nursing at its March meeting. "In contrast," he said, "the system is expected to graduate 353 RNs and 54 LPNs each year."

According to the report, RN employment growth will be greatest in Clark County, rising by 84 percent, or more than 5,000 jobs.

Factors driving the increase include greater emphasis on primary care, growing demands for long-term and home-health services, and rising medical needs of an aging population.

Packham said Nevada has always employed more nurses than it produces, importing much of its work force from out of the state. He added that a potential national nursing shortage may worsen Nevada's situation.

The graying of our nursing population exacerbates the problem. Board statistics show the average age of Nevada nurses is 45 and more than half will retire within 10 years.

"There is no easy solution to this complex problem," Packham concluded. "But Nevada's universities and colleges will play key roles."

Public protection through education, advocacy and the effective regulation of the practice of nursing

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NURSING NEWSLETTER

The Nevada State Board of Nursing Newsletter publishes news and information about Board actions, regulations, and activities.

Kathy Apple, Executive Director Cindy Kimball, Editor 1755 E. Plumb Lane Suite 260 Reno, NV 89502 775-688-2620 nsbnreno@govmail. state.nv.us

DIRECTORS OF NURSING

Remember to ask for hard card originals

When verifying whether an RN or LPN holds an active license, please ask to see the hard card original. When verifying if a CNA holds an active certificate, please ask to see the original certificate. The Board has recently seen several cases where copies of hard cards or certificates have been accepted, then later found to be forgeries.

Your License Is Stolen

What do you do?

If your license is lost or stolen, notify the Nevada State Board of Nursing. If you would like a duplicate license, call or visit the Las Vegas or Reno office and ask for a *Request for Duplicate* form. Then follow these steps—

- Complete the form.
- Sign the form in the presence of a notary public (usually available at your local financial institution and the Board offices).
- Include a check or money order for \$30 for an RN or LPN duplicate license, or \$5 for a CNA duplicate certificate.
- Mail or deliver the notarized form and payment to either Board office.

Your duplicate license or certificate should be mailed within 10 to 14 days after you submit your request. If you have any questions, please call the Las Vegas office.

Walk-In Policy

Remember, it takes 10 to 14 days to process applications

Just a reminder that the Nevada State Board of Nursing does not have "walk-in processing" of applications or forms. It takes 10 to 14 days to process an application or form—longer if it is not complete or if you do not meet all requirements. The only exception is the validation form, which you may walk in and purchase for \$25 if your license or certificate has been confirmed as active and you're just waiting to receive your hard card in the mail. Please call the Las Vegas office if you have any questions.

Complete Child Support Section

(Even if you don't have a child)

Federal law requires you to complete the child support section of the application, even if you don't have a child. Your application will be returned as incomplete unless you (1) check or answer one of the statements (2) mark only one statement and (3) sign and repeat your social security number in the child support section of the application.

Did You Move?

Remember to let us know

You're required to inform the Board, in writing, of any change in your address or name. You may send a letter or use the form below. Please include your name, license or certificate type and number, current address, social security number, date of birth, and your signature. If you've changed your name, include both your former and new names and legal proof of the name change.

ADDRESS AND/	OR NAME CHANGE
This is a change of □ address □ name	
(attach photocopy of legal proof of name change)	
Name (Last, First, Middle)	
Former Name	
Current Address	
City, State, Zip Code	
For identification purposes, please provide the following:	
License/certificate type	License/certificate number
□ APN □ other	
0	Date of birth
Social Security number	Year of graduation
Signature	
orginaturo	
Date	
Please return this form to: Nevada State Board of Nursing,	
4330 South Valley View, #106, Las Vegas, NV 89103	

Disciplinary Actions

Before disciplinary action is taken, the Board ensures the nurse or nursing assistant is given due process

The following are disciplinary actions taken by the Board for the period of Sept. 21, 1998 through Dec. 10, 1998.

Almeida, Monica, **CNA Applicant** Application denied based on NRS 632.320 (2) convictions. Booth, Lenora, CNA9605 Voluntary Surrender of Certificate in Lieu of Other Disciplinary Action accepted based on NRS 632.320 (7) unprofessional conduct and NAC 632.890 (27) causing a patient physical, mental or emotional harm by taking direct or indirect actions or failing to take appropriate actions.

Cantwell, Tim, RN Applicant Accepted with Agreement for 3 year Probation (Disciplinary) based on NRS 632.320 (2) convictions.

Dennis, Marie, CNA9009
Agreement for Reprimand and classes accepted based on NAC 632.890 (27) causing a patient physical harm by taking direct or indirect actions or failing to take appropriate actions.

Dick, Anissa, CNA9899 Voluntary Surrender of Certificate in Lieu of Other Disciplinary Action accepted based on NRS 632.320 (1) fraudulent application and (2) convictions.

Draper, Holly, CNA9056
Voluntary Surrender of Certificate in Lieu of Other Disciplinary Action accepted based on NAC 632.890 (10) positive drug screen at work.
Duemke, Jeff, CNA9690
Agreement for Reprimand and Fine in the amount of \$100 accepted based on NAC 632.890 (35) practicing without a certificate.

Eastburn, Christine, RN25709
Voluntary Surrender of License in Lieu of Other Disciplinary
Action based on NRS 632.320
(1) fraud or deceit in procuring a license (7) unprofessional conduct and NAC 632.890
(27) failing to perform nursing functions in a manner consistent with established or customary standards (38) engaging in unprofessional conduct with a patient or clients outside professional boundaries.

Fagala, Staci, LPN9852
Agreement for Reprimand
accepted based on NAC
632.890 (19) inaccurate
recording, falsifying or otherwise altering or destroying
records.

Gamble, Rose, RN7193 Voluntary Surrender of License in Lieu of Other Disciplinary Action accepted based on NRS 632.320 (7) unprofessional conduct.

Hannigan, Judith, RN21086 Voluntary Surrender of License in Lieu of Other Disciplinary Action accepted based on NRS 632.320 (7) unprofessional conduct.

Higginbotham, Anita, LPN4766 Voluntary Surrender of License in Lieu of Other Disciplinary Action accepted based on NRS 632.320 (14) violation of Board order.

Horvath, Kathleen, RN24169 Agreement for Probation (Disciplinary) for 2 years accepted based on NRS 632.320 (7) unprofessional conduct.

Husbands, Mary, LPN6910 Agreement for Probation (Disciplinary) for 1 year accepted based on NAC 632.890 (19) inaccurate recording and (26) customary standards.

Kosakowski, Chad, LPN10634 Agreement for Reprimand and Fine in the amount of \$100 accepted based on NAC 632.890 (35) practicing without a license.
MacCauley, Susan, CNA9666
Voluntary Surrender of Certificate in Lieu of Other Disciplinary Action accepted based on 632.890 (9) impairment and (17) diversion.

MacLean, Miranda, CNA11707 Agreement for Reprimand accepted based on NAC 632.890 (21) patient abandonment and NRS 632.320 (7) unprofessional conduct. Mayberry, Mark, RN26244 Agreement for Reprimand accepted based on NRS 632.320 (1) fraudulent application.

Minnig, Susan, LPN4278 Agreement for Reprimand accepted based on NRS 632.320 (7) unprofessional conduct and NAC 632.890 (19) inaccurate recording, falsifying or otherwise altering or destroying records. Moore, Helen, RN19679 Agreement for Reprimand accepted based on NRS 632.320 (7) unprofessional conduct and NAC 632.890 (27) causing a patient physical, mental or emotional harm by taking direct or indirect actions or failing to take appropriate actions. N'Dolo, Phoebe, CNA Applicant Accepted with Agreement for 2 year Probation (Disciplinary) based on NRS 632.320 (2) convictions.

Paul, Patricia, CNA5392 Order for revocation of certificate accepted based on NRS 632.320 (2) convictions. Paul, Shirley, RN15905 Order for Probation (Disciplinary) for 3 years accepted based on violation of NAC 632.890 (2) performing acts beyond the scope of the practice of nursing, (6) Assigning or delegating functions, tasks or responsibilities of licensed or certified persons to unqualified persons, (26) failing to abide by any state or federal statute or regulation relating to the practice of nursing.

Quartz, Rose, CNA4325 Agreement for Reprimand accepted based on NRS 632.320 (1) fraud in procuring a certificate. Robinson, Gerald, CNA3811, Renewal Applicant Application denied based on

NRS 632.320 (1) fraudulent

application.
Scott, Joan, LPN9645
Agreement for Probation
(Disciplinary) for 2 years
accepted based on NRS
632.320 (7) unprofessional
conduct.

Sites, Sandra, RN31970
Agreement for Reprimand and Fine in the amount of \$500 accepted based on NAC 632.890 (35) practicing without a license.
Sleeman, Teresa, CNA6086
Agreement for Reprimand accepted based on NAC 632.890 (22) exploiting a

Smalling, Mayani, CNA11332 Agreement for Reprimand accepted based on NRS 632.320 (7) unprofessional conduct.

patient and (38) professional

boundaries.

Susman, Diana, RN10665
Voluntary Surrender of License in Lieu of Other Disciplinary
Action accepted based on NAC 632.890 (10) positive drug screen for alcohol.
Taylor, Cora, LPN8071
Order of revocation based on NRS 632.320 (1) fraudulent application and NRS 632.320 (2) convictions.
Zeissner, Marilyn, RN13426

Zeissner, Marilyn, RN13426 Agreement for Probation (Disciplinary) for 2 years accepted based on NAC 632.890 (32) endangering the safety of co-workers by making implied threats.

Questions? Call Debra Scott, Associate Executive Director for Nursing Practice, in Reno. **BOARD MEETINGS**

May 13-14, 1999 Reno

July 14-16, 1999 (retreat) Minden/Gardnerville

September 16-17, 1999 Las Vegas

November 18-19, 1999 Reno

COMMITTEE MEETINGS Advanced Practice Advisory Committee April 26, 1999

CNA Advisory Committee April 21, 1999 July 28, 1999 October 27, 1999

Disability Advisory Committee April 22, 1999

Nursing Competency Advisory Committee April 14, 1999 July 7, 1999 October 20, 1999

Nursing Practice Advisory Committee May 19, 1999 What is a complaint?
A complaint contains a detailed description of alleged behavior that violates the Nurse
Practice Act. It must include the name of the nurse or nursing assistant, and it must be submitted in writing and signed by the person making the complaint.

Who can make a complaint?

Anyone who has information that a person may have violated the Nurse Practice Act may make a complaint. This includes consumers, other regulatory agencies, and other nurses or professionals. Some nurses report themselves and seek assistance in handling a problem in a way that best protects the public. The law provides, in the absence of bad faith, any person who reports such information or who testifies before the Board in a hearing shall not be liable for civil damages.

What Happens If A Complaint is Filed Against You?

by Robert Buck, BSN, RN, Investigator

What are your rights? How is the complaint investigated? What happens at a formal hearing?

It is the responsibility of the Nevada State Board of Nursing to protect the public health, safety and welfare of Nevada's citizens by regulating the practice of nursing.

One way the Board does this is through the disciplinary process. If the Board receives information that a licensed nurse or nursing assistant may have broken the law (the Nevada Nurse Practice Act), the Board has the authority to investigate.

What are common types of violations?

- Unprofessional conduct
- ■Negligence or abuse
- ■Fraudulent applications
- Problems with drugs, alcohol, or mental conditions which result in impaired practice
- ■Incompetence
- Criminal convictions related to the qualifications, functions and duties of a nurse

What happens when the Board receives a complaint?

The complaint is reviewed to ensure it is signed by the person making the complaint, names a nurse or nursing assistant who is licensed or certified in the state of Nevada, and alleges a violation of the Nurse Practice Act. If it is, Board staff then determine if the information alone or together with evidence, documentary or otherwise, is sufficient to require an investigation. This means that the information submitted, at face value, would be a potential violation of the Nurse Practice Act.

If the complaint meets the criteria, or the Board has directed an investigation, the matter is then assigned to one of three investigators who each handle about 100 active cases at a time.

Who investigates you?

The Board's investigators are registered nurses who receive extensive training in investigative procedure and analysis. Their nursing experience and expertise covers a wide variety of nursing specialties.

How do you find out a complaint has been filed against you?

You'll receive a notification by certified letter, containing the allegations submitted against you. It will also contain the name and telephone number of the investigator assigned to your case. It is the first step in the investigation process.

What happens during an investigation?

An investigation involves gathering and reviewing a variety of documents which may have to be subpoenaed. For example, an investigator may subpoena personnel files and patient records. Interviewing witnesses is also an important component. The fact an investigation is taking place is not public information—if questions are asked by the news media or others, the Board cannot confirm or deny that any investigation is in process.

What happens after all the evidence has been gathered?

After gathering and analyzing the data, the investigator presents the evidence for review and a decision is made to pursue the complaint or close the investigation. When an investigation is closed, the investigative file is confidential and is not available to the public.

What you should know about the investigator's position as it relates to you and the complaint.

The investigator is an independent fact-gatherer whose position is to obtain as much information regarding the complaint allegations as possible. It is not the position of the investigator to prove you guilty or innocent, but rather to collect information and evidence regarding the allegations. Frequently, a respondent

(the person against whom the complaint is filed) does not respond when sent notice of the complaint and investigation. This means the investigator may not be able to completely present the respondent's "side of the story" when the case is reviewed. This doesn't mean that you will be found guilty if you do not respond; however, by not responding, certain evidence or witness statements which may be supportive of you may not be presented.

What are the potential outcomes?

The complaint is closed.

If the evidence obtained is not sufficient to support a violation of the Nurse Practice Act, the complaint may be closed by Board staff. The Board notifies you by letter.

You can enter into an informal non-disciplinary agreement.

If the evidence is supportive of a violation of the Nurse Practice Act, but does not rise to the level requiring formal discipline, you may be offered an *Informal Non-Disciplinary Agreement*. This agreement will have certain requirements for you to complete. You must sign and return the agreement to the Board. If you successfully complete the terms of the non-disciplinary agreement within the required time frame, the case will be closed and no action will be reported to the National Council of State Boards of Nursing (NCSBN).

You can enter into an informal settlement agreement.

If the evidence is supportive of a violation of the Nurse Practice Act, you may be offered an Informal Settlement Agreement. There are different types of informal settlement agreements, from an Agreement for Reprimand to a Voluntary Surrender. The type of agreement offered is dependent on the nature of the violation and your pattern of behavior. An Informal Settlement Agreement includes an admission a violation has occurred, and is an agreement between you and the Board for disciplinary action. The agreement is placed on the Board's agenda for the next available Board meeting and is not executed until accepted by the Board. Upon

execution of the disciplinary action, it is published on the list of disciplinary actions taken by the Board, and reported to the NCSBN. You must complete all requirements of the agreement within the scheduled time frame or be subject to further disciplinary action by the Board.

You can have a formal hearing before the Board.

If the matter cannot be settled through the informal process or you request a formal hearing, the case will be presented to the Board. The Board develops formal charges in a Formal Complaint and Notice of Hearing, which is sent to you by the deputy attorney general representing the Board. You will receive the notice of the date and approximate time of the hearing at least 21 working days before the scheduled hearing.

During the administrative hearing, the deputy attorney general presents the Board's case. Then you and/or your attorney have the opportunity to present your side of the case and call and cross-examine any witnesses. The Board members may ask questions of the participants at any point in the hearing. After hearing the case, the Board will decide if you are guilty of violating the Nurse Practice Act and issue an order identifying its decision.

If you are present, you will be informed of the Board's decision at the end of the hearing. The *Findings of Fact, Conclusions of Lam, and Order* will be mailed to you. Actions the Board can take range from dismissing the complaint to revoking your license or certificate. If you are found guilty of a violation, you may be ordered to pay the costs of the investigation and hearing.

The disciplinary action will be published on the list of disciplinary actions the Board has taken and reported to the NCSBN.

What does the NCSBN do with disciplinary information?

The National Council of State Boards of Nursing collects disciplinary information from, and distributes it to, all state boards of nursing. The state boards use this information for discipline and licensing purposes.

Who is required to report violations?
Those required to report violations of the Nurse
Practice Act include individuals providing medical services who are licensed or certified to practice in Nevada, law enforcement personnel, social workers, and medical administrators.
For a comprehensive listing, refer to the Nurse

What if I'm not sure if it really is a violation?
First, read the Nurse
Practice Act. If you're still unsure, call the Board's
Reno office and talk with one of the investigators.

Practice Act, NRS 632.472.

How do I make a complaint? Obtain a complaint form by calling the Reno or Las Vegas Board office or visiting our web site. Complete it, sign it and return it to either office. You may also submit a signed, written description of the sequence of events (who, what, where, when, why, how). The complaint should also include any documentation which supports the allegation, for example, a witness statement or patient record.

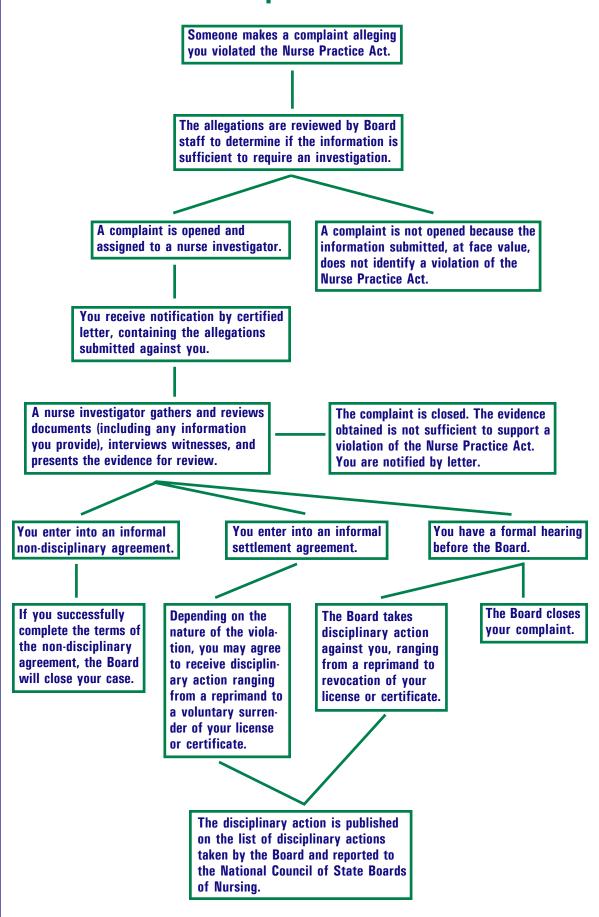
What are common types of disciplinary actions? When considering what kind of disciplinary action it should take, the Board always asks itself, "What is needed to make this person safe to practice?" The answer depends on the nature of the violation and can range from reprimanding an individual and ordering the person to attend a legal ethics class to revoking the person's license or certificate. Outlined in the Nurse Practice Act. NRS 632.325 and **632.207**, discipline actions available to the **Board include:**

- **■**Citation and/or Fine
- Reprimand
- **■** Probation
- **■** Suspension
- **■** Revocation

Whom can I call if I have questions about the complaint or disciplinary process?

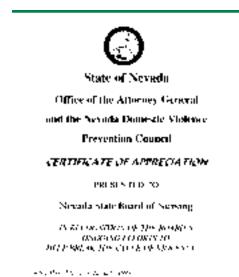
The Board encourages you to call any time you have a question about the discipline process or what constitutes a violation of the Nurse Practice Act. Just call the Reno office and ask for one of the nurse investigators or the associate executive director for nursing practice.

The Complaint Process



If a complaint is filed against you, what are your rights?

- You have the right to submit a response to the complaint and/or discuss it with the investigator.
- You have the right to consult with an attorney at any time during the course of an investigation. However, it is not mandatory that you have an attorney represent you before the Board.
- You have the right to obtain a copy of the complaint (by written request and a 60-centsper-page copying fee).
- You have the right to a formal hearing before the Board regarding the allegations against you.
- Upon receipt of a Formal Complaint and Notice of Hearing, you have the right to all evidence which may be presented against you at the hearing (copying fee applies), and the right to be informed of laws and regulations involved.
- At the formal administrative hearing, you have the right to present evidence and witnesses on your behalf, and to cross-examine witnesses presented by the Board.
- You have the right to appeal.



This certificate was presented to the Board for encouraging nurses to include domestic violence screening questions when doing assessments, and for supporting the enhancement of nursing school curriculum on domestic violence.

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Coming Up For Renewal?

Follow these tips to avoid a license lapse

- **Notify the Board immediately** of any address change. Your renewal application is sent to your address of record two months before your expiration date.
- When you receive your renewal application, take a few moments to complete and mail it—or at least don't let it gather too much dust!
- Make sure you have answered all the questions and met all the requirements. Your application will be returned to you if it is incomplete and the delay could cause your license to lapse.
- **Call the Las Vegas office** if you have any questions about how to fill out forms or applications.
- **Call early**, so if you need additional documents such as continuing education certificates, you have time to obtain them.

- It takes 10 to 14 days to process your application (if it is complete and you meet all the requirements).
- Remember that your license is your livelihood. Please don't put it at risk.

Please call the Las Vegas office if you have any questions regarding the renewal process.

Board Revises Mailing List Policy

You now have the option to remove your name

It is the policy of the Nevada State Board of Nursing to sell its mailing list to organizations which demonstrate a clear connection to health care or the practice of nursing. Such organizations include continuing education providers, nurse recruiters, nurse researchers, uniform manufacturers, and professional nursing organizations.

The Board may deny a request for its mailing list for good cause based on the protection of public health, safety and welfare. The list contains the names and addresses of every active licensed nurse and certified nursing assistant in Nevada.

In response to a request by the Nevada Assembly Commerce and Labor Committee, the Board voted at its March meeting to revise its public information policy to allow nurses and nursing assistants to request their names be removed from the mailing list.

If you wish to have your name removed, all you have to do is send your written request to the Nevada State Board of Nursing in Las Vegas.

If you have any questions about the Board's mailing list, please call the Las Vegas office.

CNA CURRICULUM REVISED

No thumb-controlled syringe feeding

Upon the recommendation of its CNA Advisory Committee, the Board removed the procedure of thumb-controlled syringe feeding from the CNA model curriculum. This means CNAs are no longer allowed to perform the procedure—the Board ruled feeding by thumb-controlled syringes should only be done by licensed health care professionals.

Contact

The Nevada State Board of Nursing

ADMINISTRATION, DISCIPLINE AND INVESTIGATION 1755 E. Plumb Lane Suite 260 Reno, NV 89502 phone - 775-688-2620 fax - 775-688-2628 email - nsbnreno@ govmail.state.nv.us

LICENSURE, RENEWAL AND CONTINUING EDUCATION
P.O. Box 46886 (89114) 4330 S. Valley View Suite 106
Las Vegas, NV 89103 phone - 702-486-5800 fax - 702-486-5803 email - nsbnlv@govmail.state.nv.us

WORLD WIDE WEB nursingboard.state.nv.us

The Future of Nursing Is Ours For The Asking

An article about cultivating leadership

Reprinted by permission from *Envision*, a Sigma Theta Tau International publication

by Christine J. Brugler, RN, MSN, Envision editor

In the October 11, 1998, Ann Landers column, *Disillusioned Nurses Air Gripes*, 10 nurses shared their views about hospital-based nursing. The impetus for this column was a previous letter written by a nurse who aired her frustrations. Landers responded by asking her nurse readers to share their views.

Unfortunately, no positive letters were sent in and the response she did get "clogged" her mailroom. The printed letters contained such words as "exhausted," "stress," "burnout," "overworked," and "depressing." Landers concluded, "Unless something is done to help our nurses, there won't be any, and we will be up that well-known creek without a paddle."

Yes, nursing has its challenges. However, did you ever hear the old adage, "If you are not part of the solution, you are part of the problem?" Nurses cannot wait for that "something," that solution, sitting idle.

How can nurses create effective solutions? Well, instead of focusing on the negative and being stuck in the proverbial "rut," one strategy is to create a positive paradigm of a given situation. By

doing so, creative energy is cultivated to meet challenges head on.

For example, what if hospital-based nurses approached their work with an awareness that people are admitted to hospitals when they need continuous NURSING care. Think about it. Other than nursing, all other hospital services (including medical care) could be provided to individuals as outpatients. Imagine the power, the creative energy and the collective voice this particular group of nurses would have in meeting the challenges presented by today's complex health care system.

In order to successfully meet challenges, nurses also need to be well prepared. This is why participation in professional organizations like Sigma Theta Tau is so powerful to a nurse's growth and development.

Yes, nurses can create the very best solutions for the challenges ahead. With commitment, vision, planning and preparation, the future of nursing is ours for the asking.

THE BOARD SAYS THANKS

At its December 1998 meeting, the Board recognized Beverly Cleff, R.N., Ed.D., for her six years of service on the Board's Disability Advisory Committee, and John Glen, CADAC, and Patricia Davin, Ph.D., CADAC, for their 10 years as nurse support group facilitators for the Board's Alternative Program for Impaired Nurses. At its March meeting, the Board thanked Donna Cowling, R.N., and Margaret (Elaine Young), R.N., for their roles in developing the nurse refresher course.

Nursing Newsletter Nursing Newsletter

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